

FUEL BILLING WORKSHEET

TRANSMITTAL # _____
BILL # _____

USPFO FOR CALIFORNIA
P.O. BOX 8104
CAMP SAN LUIS OBISPO, CA 93403-8104

DEPARTMENT, ESTABLISHMENT, BUREAU, OR OFFICE BILLED:
BILLING ADDRESS

ORDER =

FUEL PROVIDED AT:

WHEN:

ARTICLES/SERVICES	Gallons RECEIVED	Unit Price PER GALLON	Billing AMOUNT
JP-8			\$
TOTAL:			\$

PAYMENT SHOULD BE SENT TO:

USPFO FOR CALIFORNIA
P.O. Box 8104 ATTN: CAUS-BF (GINTHER)
Camp San Luis Obispo, CA 93403-8104

ACCOUNTING CLASSIFICATIONS (BILLING OFFICE)

2112065	111G11.60 (26EE) LOS ALAMITOS, CA___/LGA	R04_97	S04376
2112065	113G05.60 (26EE) MATHER, CA___/LGA	R04_97	S04376
2112065	133G92.60 (26EE) CP ROBERTS, CA___/LGA	R04_97	S04376